

**Health Benefit Exchange
Plan Management Workgroup
June 19, 2014**

Sample Enrollment and Billing Questions for Discussion with Issuers

Enrollment Questions

1. Will the carriers accept a standardized format for sending their disenrollment file or will the Exchange need to have the capability to receive and process multiple formats?
2. What is the last day of the month a carrier will accept an enrollment?
3. Do carriers currently allow any grace period for non-payment for the small group or individual plans?

Billing Questions

1. Does the concept of an “initial estimated quote” exist for small group plans today? What effects will changes in a small group’s composition of plans have for the employer’s quote and do carriers/producers provide updated quotes when the composition of the small group changes?
2. Do carriers currently re-generate an updated employer invoice in the case where an employee leaves the employer before the effective coverage date, and before payment is due for the coverage period (i.e. employer has not yet made a payment)?
3. Do carriers currently give a credit to an employer in the case where an employee leaves the employer before the effective coverage date, but after payment is due for the coverage period (i.e. employer has made a payment)?
4. Do carriers currently provide any prorated credit for a small group employee who dis-enrolls in the middle of a month that has been paid for?
5. Is there any other case for which an employer will be credited/refunded for mistaken enrollment of an employee (either duplication or mistaken enrollment of any kind)?

Payment Questions

1. Do carriers currently accept partial payment for a small group plan? If yes, how is that premium allocated for the members of the small group, e.g. \$1000 payment for 10 employees; employer only pays \$900 for one month? How is the premium distributed per employee?
2. Do carriers currently allow any tolerance in the payment received (payments within a threshold is considered full payment) for individual or small group plans?

Data Questions

1. How do carriers receive 820 and 834 files today? (The ACA directs electronic transfer of data, which will begin in mid to late 2013.) Do carriers now use a standard electronic format? If not, what are the different ways a carrier accepts payment and enrollment files?
2. Do carriers envision a separate 834/820 file for individual and small group plans?
3. If necessary, would you be willing to share your 834/820 file layouts? (The Exchange will need to develop a standard format and would like to make it as simple as possible for carriers.)
4. What information will the Exchange receive from the carrier regarding changes in enrollee data, demographic or eligibility related, e.g., change in Income change in address, or change in DOB?